



City of Greenville
Parks and Recreation Department
PO Box 2207
206 S. Main St., Greenville, SC 29602

SCHOLARSHIP APPLICATION

For office use only

FY 2012 AMT\$ _____ APPROVED _____ DENIED _____

Important: Please complete the entire form. Incomplete forms will be returned.

IN ADDITION TO THIS FORM, OFFICIAL DOCUMENTATION OF PROOF FROM THE SCHOOL DISTRICT STATING THAT YOUR CHILD/CHILDREN QUALIFY FOR FREE AND REDUCED LUNCHES. SEPARATE DOCUMENTATION FOR EACH INDIVIDUAL IS REQUIRED.

Child's Name _____ Child's Date of Birth _____

Legal Guardian _____

Address _____

City / State _____ Zip Code _____

Daytime Phone _____ Evening Phone _____ Fax _____

Email Address _____

Requesting Scholarship for (name of program/event) _____

COMMUNITY CENTER YOUR CHILD WILL BE ATTENDING:

Total Fee Waiver Requested \$ _____

City of Greenville – Parks and Recreation Department

PO Box 2207

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